IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: David GOLDWITZ

Title: PORTABLE SHELTER FOR

GOLFERS

Appl. No.: Unknown

Filing Date: Herewith

Examiner: Unknown

Art Unit: Unknown

UTILITY PATENT APPLICATION TRANSMITTAL

Mail Stop PATENT APPLICATION Commissioner for Patents PO Box 1450 Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

David Goldwitz 6820 Benjamin Road Tampa, Florida 33684

[X] Applicant claims small entity status under 37 CFR 1.27.

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Enclosed are:	
[X]	Specification, Claim(s), and Abstract (6 pages).
[X]	Informal drawings (3 sheets, Figures 1, 2, 3).
[]	Declaration and Power of Attorney (pages).

Assignment of the invention to (

).

[]	Assignment Recordation Cover Sheet.				
[]	Small Entity statement.				
[]	Request for application not to be published with certification under 35 USC 122(b)(2)(B)(i).				
[]	Information Disclosure Statement.				
[]	Form PTO/SB/08 with copies of listed reference(s).				
[X]	Application Data Sheet (37 CFR 1.76) (3 pp).				
[]	Claim for Convention Priority.				

The filing fee is calculated below:

	Claims		Included		Extra		Rate		Fee
	as Filed		in		Claims				Totals
			Basic Fee						
Basic Fee							\$770.00	=	\$770.00
Total	1	-	20	=	0	x	\$18.00	=	\$0.00
Claims:									
Independents	1	-	3	=	0	x	\$86.00	=	\$0.00
•									
If any Multiple	=	\$0.00							
Surcharge und	ler 37 CFR	1.16	(e) for late	filiı	ng of	+	\$130.00		\$130.00
Executed Declaration and late payment of filing fee									
							SUBTOTAL:	=	\$900.00
[]		Sm	all Entity I	Pees	Apply (subtra	act ½ of above):	=	\$450.00
							L FILING FEE:	=	\$450.00

- [] A check in the amount of \$0.00 to cover the filing fee is enclosed.
- [X] The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- [] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be

enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date January 30, 2004

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